

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.

FILED DATE

APPLICANT(S)

CLAIMS

	AD FLD		ADJUDICATED		ADJUDICATED	
	CID	DEP	CID	DEP	CID	DEP
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TOTAL IND.	3					
TOTAL DEP.						
TOTAL CLAIMS						

	CID	DEP	CID	DEP	CID	DEP
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